

Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

Form Approved. OMB No. 2050-00.

<b>UNIFORM HAZARDOUS WASTE MANIFEST</b>		1. Generator ID Number <b>KSD007248846</b>		2. Page 1 of <b>1</b>	3. Emergency Response Phone <b>(800) 483-3718</b>		4. Manifest Tracking Number <b>008037602 FLE</b>		
		5. Generator's Name and Mailing Address <b>Clean Harbors Kansas LLC 2549 North New York Street Wichita, KS 67219 Phone: (316) 269-7400</b>		Generator's Site Address (if different than mailing address) <b>SAME</b>					
6. Transporter 1 Company Name <b>US Bulk Transportation Inc</b>		U.S. EPA ID Number <b>PA49873475</b>		7. Transporter 2 Company Name		U.S. EPA ID Number			
8. Designated Facility Name and Site Address <b>Clean Harbors Lone Mountain LLC 40355 S County Road 236 Wynona, OK 73660 Facility's Phone: (580) 697-3500</b>		U.S. EPA ID Number <b>ORD065438275</b>							
GENERATOR	9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))			10. Containers		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
					No.	Type			
	<b>x</b>	<b>1. NA3077, HAZARDOUS WASTE, SOLID, N.O.S., (F001, F003), 9, PG III</b>			<b>1</b>	<b>DT 16</b>	<b>EST</b>	<b>y</b>	<b>F001 F002 F003 F004 F005</b>
14. Special Handling Instructions and Additional Information <b>1. CH021502X08 ERG#171 2-03-15 TR# 125 TL# 125A</b>									
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.									
Generator's/Officer's Printed/Typed Name <b>Jim Tyson</b>									
Signature <i>Jim Tyson</i>									
Month Day Year <b>2 03 15</b>									
TRANSPORTER	16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: Date leaving U.S.:								
	17. Transporter Acknowledgment of Receipt of Materials								
	Transporter 1 Printed/Typed Name <b>JACK CRNDORFF</b>								
Signature <i>Jack Crndorff</i>									
Month Day Year <b>2 03 15</b>									
DESIGNATED FACILITY	18. Discrepancy								
	18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection								
	Manifest Reference Number:								
	18b. Alternate Facility (or Generator) U.S. EPA ID Number								
	Facility's Phone:								
18c. Signature of Alternate Facility (or Generator)									
Month Day Year									
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)									
1. <b>1132</b>		2.		3.		4.			
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a									
Printed/Typed Name									
Signature									
Month Day Year									

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Form Approved. OMB No. 2050-0039

<b>UNIFORM HAZARDOUS WASTE MANIFEST</b>		1. Generator ID Number <b>KSD007246846</b>	2. Page 1 of <b>1</b>	3. Emergency Response Phone <b>(800) 483-3718</b>	4. Manifest Tracking Number <b>008037602 FLE</b>		
5. Generator's Name and Mailing Address <b>Clean Harbors Kansas LLC 2549 North New York Street Wichita, KS 67219</b>		Generator's Site Address (if different than mailing address) <b>SAME</b>					
Generator's Phone: <b>(316) 269-7400</b>							
6. Transporter 1 Company Name <b>US Bulk Transportation Inc</b>				U.S. EPA ID Number <b>PA0987347515</b>			
7. Transporter 2 Company Name				U.S. EPA ID Number			
8. Designated Facility Name and Site Address <b>Clean Harbors Lone Mountain LLC 40355 S County Road 236 Wavoka, OK 73860</b>		U.S. EPA ID Number <b>OKD065438376</b>					
Facility's Phone: <b>(580) 697-3500</b>							
GENERATOR	9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers	11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes	
			No.	Type			
	<b>X</b>	<b>1. HA3077, HAZARDOUS WASTE, SOLID, N.O.S., (F001, F003), 9, PG III</b>	<b>1</b>	<b>DT 16</b>	<b>EST</b>	<b>Y</b>	<b>F001 F002 F003 F004 F005</b>
		<b>2</b>					
		<b>3</b>					
	<b>4</b>						
14. Special Handling Instructions and Additional Information <b>1. CH931502KOR ERG#171</b> <b>2-03-15</b> <b>TR# 125 TL# 125A</b>							
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.							
Generator's/Offor's Printed/Typed Name <b>Jim Tyson</b>							
Signature <i>Jim Tyson</i>							
Month Day Year <b>2 03 15</b>							
TRANSPORTER	16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: Date leaving U.S.:						
	17. Transporter Acknowledgment of Receipt of Materials						
	Transporter 1 Printed/Typed Name <b>JACK ORNDORFF</b>						
	Signature <i>Jack Orndorff</i>						
	Month Day Year <b>2 03 15</b>						
	Transporter 2 Printed/Typed Name						
	Signature						
	Month Day Year						
DESIGNATED FACILITY	18. Discrepancy						
	18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection						
	18b. Alternate Facility (or Generator) Manifest Reference Number: U.S. EPA ID Number						
	Facility's Phone:						
	18c. Signature of Alternate Facility (or Generator) Month Day Year						
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)							
1. <b>H132</b>		2.		3.		4.	
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a							
Printed/Typed Name <i>Jim Tyson</i>							
Signature <i>Jim Tyson</i>							
Month Day Year <b>2 03 15</b>							